

Friendly House, Inc
Ph. 508-755-4362
Fx. 508-793-7800



Wheels to Water Summer 2011
July 5 – August 14
REGISTRATION FORM

SWIM
ONLY

☐

REC
ONLY

☐

BOTH

☐

Pick Up Location

Child's Name

Date of Birth

M F

Sex

Childs Name

Date of Birth

M F

Sex

Parent's/Guardian's Name

Parent's/Guardian's Name

()

()

Home Phone

Work Phone

()

()

Home Phone

Work Phone

Address (Include Apartment #)

Address (Include Apartment #)

City, State, Zip Code

City, State, Zip Code

Alternative Emergency Contacts

Primary Emergency Contact

Secondary Emergency Contact

()

()

Home Phone

Work/Cell Phone

()

()

Home Phone

Work/Cell Phone

Address

Address

City, State, Zip Code

City, State, Zip Code

Allergies/Special Health Considerations – Please list any and all allergies to food or medications.

Daily Items for Participants: backpack, water bottle, swim suit, towel, sunscreen, change of clothes.

It is not recommended that the participant bring any electronic devices such as cell phones, iPods, mp3 players, headphones etc.

By signing this form I, parent/ legal guardian of registered participant, hereby understand that: **1.** my child is a participant in the Wheels to Water Program, **2.** my child is between the ages of 7 and 17, **3.** my child must remain at the pool/recreation site at all times if they are utilizing Wheels to Water transportation, **4.** my child must be picked up at specified drop-off site unless he/she is granted permission to walk home from the drop-off site, **5.** my child may be removed from the Wheels to Water Program for misbehavior, **6.** all required information being provided in this registration form is both accurate and true, **7.** I must provide and keep current all emergency contact information regarding my child, **8. Wheels to Water and its affiliated partner agencies are not responsible for lost or stolen items.**

Signature of Parent/Guardian

Date

I give permission for my son(s)/ daughter(s) to walk home from the Wheels to Water drop-off site.

Signature of Parent/Guardian

Date

☐ MY CHILD IS NOT TO BE PHOTOGRAPHED FOR ANY PURPOSE FOR THE DURATION OF THE WHEELS TO WATER PROGRAM

☐ MY CHILD REQUIRES ADA ACCESSIBLE TRANSPORTATION

Please mail to: Friendly House • 36 Wall Street • Worcester, MA 01604